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Abstract 433

TITLE: "We Is 'Et' Up with Methamphetamine:" Sex and Needle-Sharing in Rural Virginia,

1997

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BACKGROUND: Injection drug use (IDU) is a recognized risk factor for HIV transmission. By June 1998, IDU accounted for 25.3% of AIDS risk factors in the U.S. and 18% in Virginia. IDU has not, however, been recognized as a major mode of transmission in rural Virginia. A partner notification (PN) investigation for a newly HIV-positive methamphetamine user revealed an unusual network of sex and needle-sharing partners in rural western Virginia indicating a need for development of interventions targeted to IDUs in a rural context

METHODS: PN was initiated upon reporting of the positive test result to the health department. Traditional PN methods were used including interviewing the original patient (OP) for sex partners, injection equipment sharing partners and location information. The OP brought several partners to her home for voluntary testing performed by health department staff. Other locatable partners were contacted and offered testing either on the spot or by appointment at the health department. Informal interviews were conducted with local substance abuse agencies, police and key community informants.

RESULTS: In the spring of 1997, a 28-year-old Caucasian woman (OP) was found to be HIV+ after having been tested at her request. Her CD4 count was normal and viral load undetectable at the time of diagnosis. She had a negative HIV test in 1993 and reported a history of poly drug use including regular injectable methamphetamine. She referred her primary sex partner for testing The OP's partner also tested HIV+ with a CD4 count of 281. During subsequent PN interviews, the OP and her partner offered a total of 18 sex and/or needle-sharing partners between 1994 and 1997. Of the 18 partners, two were African American and 16 were Caucasian. All were between 21 and 35 years of age. The majority were employed in service or trade occupations. None were college educated. Six partners were exclusively sex partners of the OP, 10 were exclusively needle partners and 2 were both. In addition to the 18 partners of the OP, 2 associated clusters of 4 and 3 partners were located. None of the partners except the OP and her primary partner were found to be HIV+. The local police reported that arrests associated with methamphetamine use were increasing. The DEA reports 11, 17, 27 and 13 arrests for methamphetamine-related charges in 1996, 1997, 1998 and 1st quarter of 1999, respectively, in this county. No associated increases in admissions to drug treatment for methamphetamine use were found.

CONCLUSION: PN revealed an unexpected and extensive network of sex and needle-sharing partners in rural western Virginia associated with methamphetamine, a drug uncommonly found in the area prior to 1997. These findings suggest a new presence of injection drug use associated with the appearance of crystal methamphetamine as a feature of risk behavior in this rural community. Interventions including cross-training of substance abuse counselors, police, health care providers, as well as interventions targeted at IDUs in a rural context will be necessary to prevent spread of HIV in this isolated area.

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